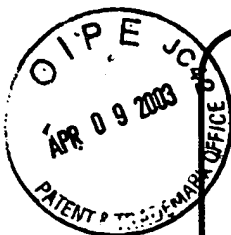


\$2837

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Applicati n Number	09/885,652
Filing Date	June 20, 2001
First Named Inventor	Elihai Shahal
Group Art Unit	2837
Examiner Name	Marlon T. Fletcher
Attorney Docket Number	Sha-1

Total Number of Pages in This Submission 19

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee determination <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request and fee (check) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

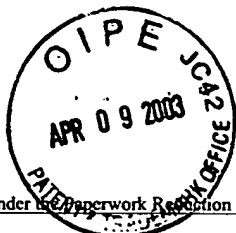
Firm or Individual name	Robert L. Stone
Signature	<i>Robert L. Stone</i>
Date	April 4, 2003

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 4, 2003

Typed or printed name	Robert L. Stone		
Signature	<i>Robert L. Stone</i>	Date	April 4, 2003

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U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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# PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

09/885,652

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$
x \$	=
x	=
+	=
TOTAL	

RATE	FEE
	\$
x \$	=
x	=
+	=
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 57	Minus	** 57	= 0
	Independent (37 CFR 1.16(b))	* 4	Minus	*** 4	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$ 9	= 0
x 42	= 0
+ 140	= -
TOTAL ADDIT. FEE	0

RATE	ADDI- TIONAL FEE
x \$	=
x	=
+	=
TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus	**	=
	Independent (37 CFR 1.16(b))	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$	=
x	=
+	=
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
x \$	=
x	=
+	=
TOTAL ADDIT. FEE	

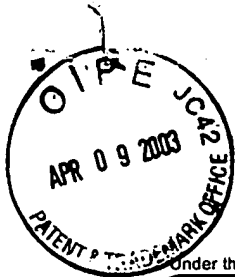
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus	**	=
	Independent (37 CFR 1.16(b))	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE
x \$	=
x	=
+	=
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
x \$	=
x	=
+	=
TOTAL ADDIT. FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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2831

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Applicati n Number	09/885,652	
	Filing Date	June 20, 2001	
	First Named Inventor	Elihai Shahal	
	Group Art Unit	2837	
	Examiner Name	Marlon T. Fletcher	
Total Number of Pages in This Submission	3	Attorney Docket Number	Sha-1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
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<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): POSTCARD
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input checked="" type="checkbox"/> Request for Refund & Declaration	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert L. Stone
Signature	
Date	April 4, 2003

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 4, 2003	
Typed or printed name	Robert L. Stone
Signature	
Date	April 4, 2003

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April 4, 2003 (Mail Date)

Please note-There are 2 papers for SN 08/885,652 in this envelope-Amendment & Request for Refund (with Declaration)



✓re Applicant: Elihai SHAHAL

Serial No.: 09/885,652

Filed: 06/20/2001

**For: METHOD AND SYSTEM FOR LEARNING  
TO PLAY A MUSICAL INSTRUMENT**

Examiner: Marlon T. Fletcher

**Attorney Docket: Sha-1**

Group Art Unit: 2837

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

## DECLARATION

I am the inventor of this application, during the Dates of 12/30/02 to 01/9/03 I was in Israeli Military Service,As a result of the service I was ill from 01/8/03 to 01/20/03

Because of these I was prevented From consulting with my attorney

I therefore request that I only be charged for one month Extension time.

I hereby declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

**Signature**  
**Elihai Shahal**

01 April 2003

Date \_\_\_\_\_

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor Applicant: Elihai SHAHAL

Serial No.: 09/885,652

Filed: 06/20/2001

For: METHOD AND SYSTEM FOR LEARNING  
TO PLAY A MUSICAL INSTRUMENT  
(amended below)

§  
§  
§  
§  
§  
§  
§

Examiner: M. T. Fletcher

Group Art Unit: 2837

Attorney Docket: Sha 1

Commissioner for Patents  
Washington, D.C. 20231

REQUEST FOR REFUND LETTER

Sir:

Please find enclosed with this Request for Refund Letter a Declaration of the inventor, Elihai Shahal, confirming extenuating circumstances of Israeli military service and illness during a critical period of about 3 weeks (December 30, 2002 to January 20, 2003. During this period he could not effectively communicate with the undersigned attorney toward response to the Office Action of November 6, 2002. This resulted in the need for an extension of time beyond the normal three month period expiring February 6, 2003, and ultimately resulted in the need to go beyond the first extension month expiring March 6, 2003.

In view of these circumstances it is respectfully requested that a refund of the difference of US\$150 between the first and second extension months be made. If this request is accepted a check may be sent to the undersigned attorney's address of record, payable to him or to inventor, Elihai Shahal. Alternatively, the refund amount could be held by the Patent and Trademark Office pending need for payment of further fees.

Respectfully submitted,



Robert L. Stone  
Attorney for Applicant  
Reg. No. 22, 272  
732-254-2674

Enc.

*April 4, 2003*

*10/Refund  
check  
4/14/03*

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APR 14 2003  
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